

NOV 22 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

RESPONSE

Application No.: 10/799,611
Title: Flame Simulating Assembly
Inventors: Kristoffer Hess and Kelly Stinson
Applicant: Dimplex North America Limited
Filing Date: March 15, 2004
Examiner: Brian K. Green
Group Art Unit: 3611
Our File No.: K8000143US3B
Customer No.: 34236

Commissioner of Patents
U.S. Patent and Trademark Office
Randolph Building
401 Dulany Street
Mail Stop Amendment
ALEXANDRIA, VA 22314
U.S.A.


Dear Commissioner:

In response to the office action mailed July 22, 2005, to which a reply was due on or before October 22, 2005, please amend the above-identified application as follows.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 6 of this paper.

NOV 22 2005

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. K8000143US3B	
Applicant(s): Hess et al.						
Application No. 10/799,611	Filing Date 03/15/2005	Examiner Brian Green	Customer No. 34236	Group Art Unit 3611	Confirmation No. 8421	
Invention: FLAME SIMULATING ASSEMBLY						
COMMISSIONER FOR PATENTS:						
Transmitted herewith is an amendment in the above-identified application.						
The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	3 -	20 =	0	x \$50.00	\$0.00	
INDEP. CLAIMS	1 -	3 =	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account <input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 Signature			Dated: November 22, 2005			
Valentine A. Cottrill Registration No. 50,187 Gowling Lafleur Henderson LLP 50 Queen Street North, Ste. 1020 Kitchener, ON N2H 6M2 Canada			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date) _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence			
CC:						